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FEE TRANSMITTAL FOR FY 2009    X   Applicant claims email entity status. See 37 CFR 1.27   Art Unit   3736     TOTAL AMOUNT OF PAYMENT   (5) 65.00   Attorney Docket No.   3427-0137PUS1	Effective on	Complete it Known							
Figs   Sample   Figs   Figs   Sample   Figs   Sample   Figs   Sample   Figs   Sample   Figs									
Examiner Name B. S. Szmal    X   Applicant claims small entity status. Soo 37 CFR 1.27   Art Unit   3736	FEE IRAN								
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METHOD OF PAYMENT   (\$) 65.00   Altomey Docket No.   3427-0137PUS1				паі					
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Check Credit Card Money Order None Other (please identify):    X   Deposit Account   Deposit Account Number:   O2-2448   Deposit Account Name:   Birch, Stewart, Kolasch & Birch, LLP	TOTAL AMOUNT OF PAYMENT	Attorney Docket No. 3427-0137PUS			1				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filing fee	METHOD OF PAYMENT (check all that apply)								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below   Charge fee(s) indicated below, except for the filling fee     X   Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17    EECALCULATION	Check Credit Card Money Order None Other (please identify):								
Charge fee(s) indicated below	x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
X   Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   X   Credit any overpayments	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Fee (s) under 37 CFR 1.16 and 1.17									
BASIC FILING, SEARCH, AND EXAMINATION FEES   SEARCH FEES   Small Entity   Fee (\$)   Fee (\$)									
File   Fee   Samal   Entity   Fee   Samal	FEE CALCULATION								
Application Type	1. BASIC FILING, SEARCH, AN	ND EXAMINA	TION FEES						
Name									
Design   220   110   100   50   140   70	Application Type F						Fees P	'aid (\$)	
Plant   220   110   330   165   170   85	Utility	330	165 540	270	220	110			
Reissue	Design	220	110 100	50	140	70			
Provisional 220 110 0 0 0 0 0 0 0  2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$) Fee (\$)  Each claim over 20 (including Reissues) 220 110  Multiple dependent claims over 3 (including Reissues) 320 195  Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims  14 -20 or HP 0 x 26.00 = 0.00 Fee (\$) Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  1 -3 or HP = 0 x 110.00 = 0.00  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)	Plant	220	110 330	165	170	85			
2. EXCESS CLAIM FEES  Fee Description  Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claims over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Total Claims  Fee (\$)  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Fee Paid (\$)  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Total Sheets  Extra Claims paid for, if greater than 3.  S. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  Fee (\$)  Fee Paid (\$)	Reissue	330	165 540	270	650	325			
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  Extra Claims  Fee (\$) Fee Paid (\$) Multiple Dependent Claims  14	Provisional	220	110 0	0	0	0			
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Each independent claim over 3 (including Reissues)  Multiple dependent claims  Total Claims  14  20 or HP  0 x 26.00 = 0.00  Fee Paid (\$)  HP = highest number of total claims paid for, if greater than 20.  Indep. Claims  Extra Claims Fee (\$) Fee Paid (\$)  Fee Paid (\$)  1 -3 or HP = 0 x 110.00 = 0.00  HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE  If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)	Tee Description								
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(tourio up to a whole number) x									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 2251 Extension for response within first month 65.00									
SUBMITTED BY V 2000 /									
Signature Common Registration No. (Automor/Agent) 39,538 Telephone (703) 205-8000	5-8000								
	Name (Print/Type) James T. Eller, Jr.					Date	July 2, 2009		
No. (6) (6) (6) (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	Name (Print/Type) James T. Elle	er, Jr.	1			Date	July 2,	2009	